

Section III



General Application Requirements

A. Definitions

Washington State has adopted the definitions in 34 CFR 303.6 – 303.22 of the early intervention section of IDEA regulations for use in implementing Washington’s Infant Toddler Early Intervention Program (ITEIP).

Early intervention program definitions are found on the following pages. In addition, clarification will be found within the interagency agreement and policy text. Other definitions deemed important by Washington’s State Interagency Coordinating Council (SICC) are also included.

Act – Individuals with Disabilities Education Act.

Adaptive Skills – The ability to develop and exhibit age appropriate self-help skills, including but not limited to feeding, toileting, personal hygiene, dressing, play skills, and the ability to identify and communicate needs and preferences.

Appropriate Professional Requirements in the State – Entry level requirements that:

1. Are based on the highest requirements in the state applicable to the profession or discipline in which a person is providing early intervention services; and
2. Establish suitable qualifications for personnel providing early intervention services under the early intervention services section of IDEA to eligible children and their families who are served by state, local, and private agencies.

(For further information, see Section IV L. Personnel Standards.)

Assessment and Assessment Services – The ongoing procedures used by appropriate qualified personnel throughout the period of a child’s eligibility, under the early intervention section of IDEA, to identify the child’s unique strengths and needs and the early intervention services appropriate to meet those needs; and to identify the resources, priorities, and concerns of the family, and the supports and services necessary to enhance their capacity to meet the developmental needs of their infant or toddler with a disability. (For further information, see Section IV F. Child Evaluation, Assessment, and Nondiscriminatory Procedures.)

Birth To Three or Birth Through Two – A child up to 36 months of age.

Central Directory – Information about public and private early intervention services resources and experts available in the state. (For further information, see Section IV B. Central Directory.)

Children – Infants and toddlers with disabilities who are eligible for services as defined in the Washington State eligibility criteria.

Child Find – See Early Identification

Cognitive – The process of perceiving, comprehending, remembering, reasoning, and making sense out of experiences and information.

Consent:

1. The parent has been fully informed of all information relevant to the activity for which consent is sought in his or her native language or other mode of communication, including being informed of existing assessment data to be used within the definitions of current assessment.
2. The parent understands and agrees in writing to the carrying out of the activity for which his or her consent is sought, and the consent describes that activity and lists the records (if any) that will be released and to whom.
3. The parent understands that the granting of consent is voluntary on the part of the parent and may be revoked at any time.
4. The parent has the right to determine whether their infant or toddler or other family members will accept or decline an early intervention service, in accordance with state law, without jeopardizing other early intervention services.

County Interagency Coordinating Council – Local County Interagency Coordinating Councils (CICCs) are in each geographic service area. A locally designated contracting agency assures a council is in place to advise and assist the early intervention services contractor and other participating agencies in coordinating, implementing, and maintaining the local early intervention services system. The councils establish a clearly defined process that incorporates Infant Toddler Early Intervention Program (ITEIP) policies. The purpose of the CICC is to:

1. Create a structured link between agencies.
2. Eliminate unnecessary duplication of services.
3. Facilitate interagency problem solving.
4. Assist in implementing a full continuum of services. And
5. Improve services to all identified children, birth to three, with disabilities and their families.

The CICCs are part of the statewide ICC structure and coordinate with the State Interagency Coordinating Council (SICC).

Days – Calendar Days

Developmental Delay – A child has a developmental delay if she/he is experiencing a 1.5 standard deviation or 25% of chronological age delay in one or more developmental areas OR has a diagnosed physical or mental condition that has a high probability of resulting in developmental delay. (For further information, see Section IV A. State Definitions of Developmental Delay.)

Developmental Screening – The use of a tool or procedure that is quickly and easily administered in order to identify those children, whose development may not be within the expected ranges, and are, therefore, in need of further evaluation and assessment.

Early Identification (Child Find) – The process of locating, identifying, referring, and evaluating those infants and toddlers who have or are at risk of having a developmental delay, if early intervention services are not provided. (For further information, see Section IV E. Comprehensive Child Find System.)

Early Intervention Services – Those services that are designed to meet the developmental needs of each child eligible under the early intervention section of IDEA and the needs of the family related to enhancing the child’s development. These services are selected in collaboration with parents. They are provided under public supervision by qualified personnel, as defined under Washington State’s definition of “qualified”, and are in conformity with an Individualized Family Service Plan (IFSP). They are offered to families at no cost, unless state law requires a system of payments by families including a schedule of sliding fees. They meet the standards of Washington State. Services are provided in natural environments to the maximum extent appropriate to the needs of the child, including the home and community settings in which infants and toddlers who are not disabled participate. (See definition of natural environments.)

1. To the extent appropriate, service providers in each area of early intervention services are responsible for:
 - a. Consulting with parents, other service providers, and representatives of appropriate community agencies to ensure collaboration, coordination, and the effective provision of services in that area.
 - b. Training parents and others regarding the provision of those services. And
 - c. Participating in the multidisciplinary team’s
 - (1) Evaluation and assessment of a child.
 - (2) Family-directed assessment of the resources, priorities, and concerns of the family.
 - (3) Identification of supports and services necessary to enhance the family’s capacity to meet the developmental needs of the child.
 - (4) Development of integrated goals and outcomes for the Individualized Family Service Plan (IFSP) (see Federal Register 34 CFR 303 §303.12 – Definitions).

Early intervention services include items two through seventeen below.

2. Assistive technology devices and services means any item, piece of equipment or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of infants and toddlers with disabilities.

Assistive technology service means a service that directly assists an infant or toddler with a disability in selection, acquisition, or use of an assistive technology device. Services include:

- a. An evaluation of the needs of an infant or toddler with a disability, including a functional evaluation of the child in the child’s customary environment.
- b. Purchasing, leasing, or providing for the acquisition of devices.
- c. Selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing, or replacing devices.
- d. Coordinating and using other therapies, interventions, or services with devices, such as those associated with existing education and rehabilitation plans and programs.
- e. Training and technical assistance for an infant or toddler or, if appropriate the child’s family.
- f. Training or technical assistance for professionals, including individuals providing early intervention services, or others who provide services to or are substantially involved in the major life functions of infants and toddlers with disabilities.

3. Audiology includes:
 - a. Identification of infants and toddlers with auditory impairment, using at risk criteria and appropriate audiologic screening techniques.
 - b. Determination of the range, nature, and degree of hearing loss and communication functions, by use of audiological evaluation procedures.
 - c. Referral for medical and other services necessary for the habilitation or rehabilitation of infants and toddlers with auditory impairment.
 - d. Provision of auditory training, aural rehabilitation, speech reading and listening device orientation and training, and other services.
 - e. Provision of services for prevention of hearing loss.
 - f. Determination of the infant's or toddler's need for individual amplification, including selecting, fitting, and dispensing appropriate listening vibrotactile devices, and evaluating the effectiveness of those devices.
4. Family training, counseling, and home visits means services provided, as appropriate, by social workers, psychologists, educators, and other qualified personnel to assist the family of a child eligible, under the early intervention section of IDEA, in understanding the child's special needs and enhancing the child's development.
5. Health services means services necessary to enable a child to benefit from the other early intervention services under the early intervention section of IDEA during the time that the child is receiving the other early intervention services. The term includes:
 - a. Such services as clean intermittent catheterization, tracheostomy care, tube feeding, the changing of dressings or colostomy collection bags, and other health services; and
 - b. Consultation by physicians with other service providers concerning the special health care needs of eligible children that will need to be addressed in the course of providing other early intervention services.

The term does not include the following:

- a. Services that are surgical in nature (such as cleft palate surgery, surgery for club foot, or the shunting of hydrocephalus), or purely medical in nature (such as hospitalization for management of congenital heart ailments, or the prescribing of medicine or drug for any purpose).
 - b. Devices necessary to control or treat a medical condition.
 - c. Medical-health services (such as immunizations and regular "well-baby" care) that are routinely recommended for all children.
6. Medical services only for diagnostic or evaluation purposes means services provided by a licensed physician to determine a child's developmental status and the need for early intervention services.
7. Nursing services include:
 - a. The assessment of health status for the purpose of providing nursing care, including the identification of patterns of human response to actual or potential health problems;

- b. Provision of nursing care to prevent health problems, restore or improve functioning, and promote optimal health and development; administration of medications, treatments, and regimens prescribed by a licensed physician.
8. Nutrition services include:
- a. Conducting individual assessments in:
 - (1) Nutritional history and dietary intake
 - (2) Anthropometric, biochemical, and clinical variables
 - (3) Feeding skills and feeding problems
 - (4) Food habits and food preferences
 - b. Developing and monitoring appropriate plans to address the nutritional needs of children eligible under the early intervention section of IDEA, based on the findings. And
 - c. Making referrals to appropriate community resources to carry out nutrition goals.
9. Occupational therapy includes services to address the functional needs of a child related to adaptive development, adaptive behavior and play, and sensory, motor, and postural development. These services are designed to improve the child's functional ability to perform tasks in home, school, and community settings, and include:
- a. Identification, assessment, and intervention.
 - b. Adaptation of the environment and selection, design, and fabrication of assistive and orthotic devices to facilitate development and promote the acquisition of functional skills. And
 - c. Prevention or minimization of the impact of initial or future impairment, delay in development, or loss of functional ability.
10. Physical therapy includes services to address the promotion of sensorimotor function through enhancement of musculoskeletal status, neurobehavioral organization, perceptual and motor development, cardiopulmonary status, and effective environmental adaptation. These services include:
- a. Screening, evaluation, and assessment of infants and toddlers to identify movement dysfunction.
 - b. Obtaining, interpreting, and integrating information appropriate to program planning to prevent, alleviate or compensate for movement dysfunction and related functional problems. And
 - c. Providing individual or group services or treatment to prevent, alleviate, or compensate for movement dysfunction and related functional problems.
11. Psychological services include:
- a. Administering psychological and developmental tests, and other assessment procedures.
 - b. Interpreting assessment results.
 - c. Obtaining, integrating, and interpreting information about child behavior, and child and family conditions related to learning, mental health, and development. And
 - d. Planning and managing a program of psychological services, including psychological counseling for children and parents, family counseling, consultation on child development, parent training, and education programs.

12. Service Coordination (See Family Resources Coordination)

13. Social work services include:

- a. Making home visits to evaluate a child's living conditions and patterns of parent-child interaction.
- b. Preparing a social or emotional developmental assessment of the child, within the context of the family.
- c. Providing individual and family-group counseling with parents and other family members, and appropriate social skill building activities with the child and parents.
- d. Working with those problems in a child's and a family's living situation (home, community, and any center where early intervention services are provided) that affect the child's maximum use of early intervention services. And
- e. Identifying, mobilizing, and coordinating community resources and services to enable the child and family to receive maximum benefit from early intervention services.

14. Special instruction includes:

- a. The design of learning environments and activities that promotes the child's acquisition of skills in a variety of developmental areas, including cognitive processes and social interaction.
- b. Curriculum planning, including the planned interaction of personnel, materials, and time and space, that leads to achieving the outcomes in the child's Individualized Family Service Plan (IFSP).
- c. Providing families with information, skills, and support related to enhancing the skill development of the child. And
- d. Working with the child to enhance the child's development.

15. Speech/language pathology includes:

- a. Identification of children with communicative or oropharyngeal disorders and delays in development of communication skills, including the diagnosis and appraisal of specific disorders and delays in those skills.
- b. Referral for medical or other professional services necessary for the habilitation or rehabilitation of children with communicative or oropharyngeal disorders and delays in development of communication skills. And
- c. Provision of services for the habilitation, rehabilitation, or prevention of communicative or oropharyngeal disorders and delays in development of communication skills.

16. Transportation and related costs includes the cost of travel (e.g., mileage, or travel by taxi, common carrier, or other means) and other costs (e.g., tolls and parking expenses) that are necessary to enable a child, eligible under the early intervention section of IDEA, and the child's family to receive early intervention services.

17. Vision services includes:

- a. Evaluation and assessment of visual functioning, including the diagnosis and appraisal of specific visual disorders, delays, and abilities.
- b. Referral for medical or other professional services necessary for the habilitation or rehabilitation of visual functioning disorders, or both. And

- c. Communication skills training, orientation and mobility training for all environments, visual training, independent living skills training, and additional training necessary to activate visual motor abilities.

Early intervention services are provided by qualified personnel, including:

- Audiologists
- Family therapists
- Nurses
- Nutritionists
- Occupational therapists
- Orientation and mobility specialists
- Physical therapists
- Pediatricians and other physicians
- Psychologists
- Social workers
- Special educators
- Speech-language pathologists
- Vision specialist

Early Intervention Services (EIS) Contractor – The locally designated agency or organization holding the Early Intervention Services contract, with the Department of Social and Health Services (DSHS), Infant Toddler Early Intervention Program, within the Division of Developmental Disabilities (DDD), assuring the services are in accordance with the approved Washington State Grant application.

Early Intervention Service Provider – A local public or private service provider or agency that is providing IDEA early intervention services.

Evaluation Services – The tests and procedures used by appropriate qualified personnel to determine a child's initial and continuing eligibility for early intervention services, consistent with the definition of infants and toddlers with disabilities, including determining the status of the child in each of the developmental areas. (For further information, see Section IV F. Child Evaluation, Assessment, and Nondiscriminatory Procedures.)

Evaluation Tests and Procedures – Standardized tests or procedures that measure a child's development in a percentage or standard deviation, as it compares to the development of children who have no disability at that age.

Family Resources Coordination – The term used by Washington State for service coordination. Family Resources Coordination means the activities carried out by a Family Resources Coordinator (FRC) to assist an eligible child and the child's family to receive the rights, procedural safeguards, and services that are authorized to be provided under Washington's early intervention program.

Each eligible child and the child's family must be provided one Family Resources Coordinator who is responsible for:

1. Coordinating all services across agency lines; and
2. Serving as the single point of contact in helping parents to obtain the services and assistance they need.

Service coordination is an active, ongoing process that involves:

1. Assisting parents of eligible children in gaining access to the early intervention services and other services identified in the written Individualized Family Service Plan.
2. Coordinating the provision of early intervention services and other services (such as medical services for other than diagnostic and evaluation purposes) the child needs or is being provided.
3. Facilitating the timely delivery of available services. And
4. Continuously seeking the appropriate services and situation necessary to benefit the development of each child being served, for the duration of the child's eligibility.

Specific service coordination activities include:

1. Coordinating the performance of evaluations and assessments.
2. Facilitating and participating in the development, review, and evaluation of the Individualized Family Service Plan.
3. Assisting families in identifying available service providers.
4. Coordinating and monitoring the delivery of available services.
5. Informing families of the availability of advocacy services.
6. Coordinating with medical and health providers. And
7. Facilitating the development of a transition plan to preschool services, if appropriate.

Family Resources Coordinator (FRC) – An individual who assists an eligible child and his/her family in gaining access to the early intervention services and other resources as identified in the Individualized Family Service Plan (IFSP), and receiving the rights and procedural safeguards of the early intervention program.

Family Resources Coordinators must be registered and have knowledge and understanding about:

1. Infants and toddlers who are eligible.
2. IDEA early intervention services.
3. The federal regulations, Washington State policies and procedures, the nature and scope of services available, the system of payments for services, and other information. And
4. Local early intervention resources available in their assigned geographic service area.

Frequency – The number of days or sessions that a service will be provided.

Highest Requirements in the State Applicable to a Specific Profession or Discipline – The highest entry level academic degree needed for any state approved or recognized certification, licensing, registration, or other comparable requirements that apply to that profession or discipline. (For further information, see Section L. Personnel Standards.)

Individualized Family Service Plan (IFSP) – A written plan for providing early intervention services to a child eligible under the early intervention section of IDEA and the child’s family. The plan must:

1. Be developed jointly by the family and appropriate qualified personnel involved in the provision of early intervention services.
2. Be based on the multidisciplinary evaluation and assessment of the child.
3. Include, with parental permission, a statement of the family’s resources, priorities, and concerns related to enhancing the development of the child. And
4. Include a statement of the specific early intervention services necessary to enhance the family’s capacity to meet the unique needs of their child. (For further information, see Section IV G. Individualized Family Service Plans.)

Include, Including – Items named are not all of the possible items that are covered, whether like or unlike the ones named.

Infants and Toddlers with Disabilities – Individuals, from birth to age three, who need early intervention services because, they:

1. Are experiencing developmental delays, as measured by appropriate diagnostic instruments and procedures in one or more of the following areas:
 - a. Cognitive development;
 - b. Physical development, including vision and hearing;
 - c. Communication development;
 - d. Social or emotional development; or
 - e. Adaptive development; or
2. Have a diagnosed physical or mental condition that has a high probability of resulting in developmental delay.

Infant Toddler Early Intervention Program – The program within DSHS, DDD that administers the early intervention section of IDEA.

Intensity – The length of time the early intervention service is provided, during each session, and whether the service is provided on an individual or group basis.

Interim Individualized Family Service Plan – Developed to ensure early intervention services that an eligible child and the child’s family may need before the completion of the evaluation and assessment within the 45 days after referral. (For further information, see Section IV H. Interim Individualized Family Service Plans.)

Location – The actual place or places where a service will be provided.

Method – The procedures or plans followed to accomplish the outcomes, including how the service is implemented.

Multidisciplinary – The involvement of two or more disciplines or professions in the provision of integrated and coordinated services, including evaluation and assessment activities and development of the Individualized Family Service Plan. (For further information, see Section IV

F. Child Evaluation, Assessment, and Nondiscriminatory Procedures and Section IV G. Individualized Family Service Plan.)

Native Language – means the language or mode of communication normally used by the parent of an eligible child.

Natural Environments – Settings that are natural or normal for the child's age peers who have no disability. Those may include the home, neighborhood, or community setting in which children without disabilities participate. (For further information, see Section IV I. Natural Environments.)

Parent – means a natural or adoptive parent of a child, a guardian, a person acting in the place of a parent (such as a grandparent or step-parent with whom the child lives, or a person who is legally responsible for the child's welfare), or surrogate parent who has been assigned. A foster parent may act as a parent if:

1. The natural parents' authority to make early intervention decisions required of parents on the child's behalf has been relinquished under state law.
2. The foster parent has an ongoing long-term parental relationship with the child.
3. The foster parent is willing to participate in making early intervention or educational decisions on the child's behalf. And
4. The foster parent has no interest that would conflict with the interests of the child.

Personally Identifiable – means information that includes:

1. The name of the child, the child's parent or other family member.
2. Address of the child.
3. A personal identifier, such as the child's or parent's social security number. Or
4. A list of personal characteristics or other information that would make it possible to identify the child or family with reasonable certainty.

Policies – State statutes, regulations, Governor's order, directives by State Lead Agency or other written documents that represent Washington State's position concerning any matter covered under the early intervention section of IDEA.

State policies mean those policies developed by the state of Washington including:

1. State commitment to development and implementation of the statewide system.
2. State eligibility criteria and procedures.
3. A statement that services are provided at no cost to the parent, except where a system of payments is provided for under federal or state law. (Medical services are not covered by this program or funding, except for diagnostic or evaluation purposes to determine eligibility.)
4. State standards for personnel who provide services to children eligible under the early intervention section of IDEA.
5. State position and procedures related to contracting or making other arrangements with service providers. And
6. Other positions that the state has adopted related to implementation of the early intervention section of IDEA.

Primary Referral Sources – Persons or agencies who are likely to have contact with children, and who could identify and refer them; e.g., hospitals – including prenatal and postnatal care facilities, physicians, nurses, parents, therapists, child care programs, local educational agencies, public health facilities, other health care providers, and other education and social service agencies.

Public Agency – State Lead Agency and any other political subdivision of Washington State that is responsible for providing early intervention services to children eligible under the early intervention section of IDEA and their families.

Referrals – A direct contact that meets the following criteria:

1. The Family Resources Coordinator has contact via phone or in person with the family of a child, birth to three years of age;
2. During this contact the Family Resources Coordinator explains the services that are available under the Infant Toddler Early Intervention Program (including evaluations and assessments);
3. The family identifies needs which can be addressed by the Family Resources Coordinator and early intervention services; and
4. The family is interested in services.

Qualified – Describes a person who has met Washington State’s approved or recognized certification, licensing, registration, or other state requirements that apply to the area in which the person is providing early intervention services.

Service Coordination – See Family Resources Coordination

Service Coordinator – See Family Resources Coordinator

State Approved or Recognized Certification, Licensing, Registration, or Other Comparable Requirements – The requirements that the state Legislature either has enacted or has authorized a state agency to promulgate through rules to establish the entry-level standards for employment in a specific profession or discipline in the state.

State Lead Agency – The Department of Social and Health Services is designated by the Governor to administer the early intervention section of IDEA in Washington State.

Education Department General Administration Regulations (EDGAR)

Definitions

EDGAR definitions that apply to IDEA.

The following terms are from the EDGAR requirements (34 CFR 77.1):

1. **Applicant** – means a party requesting a grant or sub-grant under a program of the Department.
2. **Award** – means financial assistance that provides support or stimulation to accomplish a public purpose. Awards include grants and other agreements in the form of money or property, in lieu of money, by the Federal Government to an eligible recipient. The term does not include:
 - a. Technical assistance, which provides services instead of money;
 - b. Other assistance in the form of loans, loan guarantees, interest subsidies, or insurance;
 - c. Direct payments of any kind to individuals; and
 - d. Contracts which are required to be entered into and administered under procurement laws and regulations.
3. **Contract** – means a procurement contract under an award or sub-award, and a procurement sub-contract under a recipient's or sub-recipient's contract.
4. **Department** – means the U.S. Department of Education.
5. **EDGAR** – means the Education Department General Administration Regulations.
6. **Fiscal year** – means the federal fiscal year – a period beginning on October 1 and ending on the following September 30.
7. **Grant** – means an award of financial assistance, including cooperative agreements, in the form of money, or property in lieu of money, by the Federal Government to an eligible grantee. The term does not include:
 - a. Technical assistance, which provides services instead of money;
 - b. Other assistance in the form of revenue sharing, loans, loan guarantees, interest subsidies, insurance, or direct appropriations; or
 - c. Assistance, such as fellowship or other lump sum award, which the grantee is not required to account for.
8. **Grantee** – means the legal entity, other than a government subject to 34 CFR Part 80, to which a grant is awarded and which is accountable to the Federal Government for the use of funds provided. The grantee is the entire legal entity even if only a particular component of the entity is designated in the award document.
9. **Grant period** – means period for which funds have been awarded.
10. **Private** – as applied to an agency, organization, or institution, means that it is not under federal or public supervision or control.
11. **Public** – as applied to an agency, organization, or institution, means that the agency, organization, or institution is under the administrative supervision or control of a government other than the Federal Government.
12. **Secretary** – means the Secretary of the Department of Education or official or employee of the Department acting for the Secretary under a delegation of authority.

B. State Lead Agency

Per appointment by the Governor, the Department of Social and Health Services (DSHS) continues to serve as the State Lead Agency. As the State Lead Agency, DSHS facilitates agency coordination, and the participation between all agencies in the implementation of a statewide system, as defined in the early intervention section of IDEA. The State Lead Agency maintains responsibility for administering the early intervention section of IDEA, assigning financial responsibility consistent with procedures outlined in the Interagency Agreement, and administration of funds provided under the early intervention section of IDEA.

The State Lead Agency provides for overall assurances, contracting, and monitoring requirements. State Lead Agency staff work to strengthen partnerships across collaborating programs within the Department of Social and Health Services (DSHS) and across the Department of Community, Trade, and Economic Development (CTED), Department of Health (DOH), Department of Services for the Blind (DSB), and Office of the Superintendent of Public Instruction (OSPI).

Program Administration

In the area of program administration, the State Lead Agency will provide staff to:

1. Assist in the development of interagency agreements;
2. Assist in the implementation and refinement of policies and procedures;
3. Provide support and assistance to intra- and interagency working committees for activities and tasks related to implementation;
4. Coordinate with the Bureau of Indian Affairs (BIA), Indian Health Services, Tribes and Tribal Councils regarding the provision of comprehensive, coordinated early intervention services;
5. Develop, implement, and monitor all contracts;
6. Provide support to the State Interagency Coordinating Council;
7. Disseminate information about IDEA and the Infant Toddler Early Intervention Program to public and private agencies and citizens;
8. Provide support to enhance interdisciplinary, family-centered training across all major disciplines serving infants and toddlers with disabilities;
9. Assist in collection, analysis, and dissemination of information obtained from data collection, which will be shared with agencies and interested parties;
10. Provide information, training, and assistance to assure full parent participation on the State Interagency Coordinating Council (SICC) and its working committees; and
11. Conduct ongoing analysis of program operations, including those required in the early intervention section of IDEA, program standards, and funding mechanisms.

C. State Interagency Coordinating Council (SICC)

The State Interagency Coordinating Council (SICC) is appointed by the Governor to advise and assist the State Lead Agency in its duties, as required by the Individuals with Disabilities Education Act (IDEA). The Governor assures that the membership of the SICC reasonably represents the population of the state. The members include:

1. At least twenty percent parents, including minority parents, parents of infants or toddlers with disabilities, or children twelve or younger with a disability who have knowledge of, or experience with, programs for infants and toddlers with disabilities. At least one such member shall be a parent of an infant or toddler with a disability or a child with a disability, age six or younger;
2. At least twenty percent public or private early intervention service providers;
3. One representative from the state legislature;
4. One person involved in personnel preparation;
5. One member from each state agency providing or paying for services and having sufficient authority to do policy planning and implementation on behalf of the agency;
6. One member from the State Education Agency responsible for preschool services to children with disabilities and having sufficient authority to engage in policy planning and implementation on behalf of the agency;
7. One member from the state agency responsible for state governance of health insurance;
8. One member from the Head Start agency or program (as of July 1, 1998);
9. One member from the state agency responsible for child care (as of July 1, 1998); and
10. Other members selected by the Governor including a representative from the Bureau of Indian Affairs (BIA) or where there is no BIA operated or funded school, from the Indian Health Service or Tribes/Tribal Councils (see 34 CFR 300.601 and membership list which follows).

Members serve without compensation, with the following exceptions: to reimburse members of the SICC for reasonable and necessary expenses for attending SICC meetings and performing SICC duties, including child care for parent representatives. Washington membership reimbursement must follow Executive Order 01-04, which is included in this section.

The State Interagency Coordinating Council meets, at least quarterly, to advise and assist the State Lead Agency. The Governor has appointed a chair who is not a representative of the State Lead Agency. All meetings will be publicly announced with sufficient advance notice of meeting dates to assure attendance and meeting places are open and accessible to the general public. Interpreters for the deaf and other necessary services must be provided at SICC meetings, both for members and participants. The SICC budget may be used to pay for these services. No SICC member may cast a vote on any matter that would provide direct financial benefit to that member or otherwise give the appearance of a conflict of interest.

During 1992, the state Legislature passed RCW 70.195 establishing the SICC. On November 18, 1992, the Governor signed Executive Order 92-10, which aligned the federal requirement of the SICC with RCW 70.195. The State Interagency Coordinating Council shall:

1. Advise and assist the State Lead Agency in the development and implementation of the policies that constitute the statewide system.
2. Assist the State Lead Agency in achieving the full participation, coordination, and cooperation of all appropriate public agencies in the state.
3. Assist the State Lead Agency in the effective implementation of the statewide system, by establishing a process that includes:
 - a. Seeing information from Parents, Service Providers, Family Resources Coordinators (Service Coordinators), Case Managers, and others about federal, state or local policies that impede timely service delivery.
 - b. Taking steps to ensure that any policy problems identified under 3a are resolved. And
 - c. To the extent appropriate, assisting the State Lead Agency in the resolution of disputes.
4. Assist the State Lead Agency in the identification of sources of funds and other support for services for the early intervention system.
5. Assist the State Lead Agency in the assignment of financial responsibilities to the appropriate agency.
6. Assist the State Lead Agency in promotion of interagency agreements.
7. Advise and assist the State Lead Agency in the preparation of grant applications and amendments to grant applications.
8. Prepare an annual report to the Governor and to the Secretary of the United States Department of Education, on the status of early intervention programs operated within the state, for children eligible under this part and their families. Submit the report to the Secretary of Education, by a date that the Secretary establishes. Each annual report must contain the information required by the Secretary of Education for the year for which the report is made.
9. Advise and assist the Office of Superintendent of Public Instruction (OSPI), as the State Education Agency (SEA), regarding the transition of toddlers with disabilities to services provided under Part B, and other appropriate services, to the extent such services are appropriate.
10. Advise and assist the State Lead Agency and the State Education Agency (SEA) regarding appropriate services, for children ages birth to six.

State Interagency Coordinating Council

MEMBER NAME	ADDRESS	TELEPHONE	POSITION # & CATEGORY	TERM EXPIRES
Sheila Ammons	Office of Superintendent of Public Instruction (OSPI) PO Box 47200 Olympia, WA 98504-7200	Tel: 360-725-6075 Fax: Email: Sheila.ammons@k12.wa.us	#22 State Education Agency	Ex-Officio
Jane Campbell (King)	King County Developmental Disabilities Division (DD) 401 Fifth Ave., Suite 520 Seattle, WA 98104	Tel: 206-263-9017 Cell: 206-851-8953 Fax: 206-205-1632 Email: jane.campbell@kingcounty.gov	#12 County Human Services	1/6/2009
Molly Chavez (Yakima)	Washington State Migrant Council 105-B So. 6 th Street Sunnyside, WA 98944	Tel: 509-837-8909 Tel: 509-488-3502 (Othello) Fax: 509-839-5803 Email: molly.chavez@wsmonline.org	#13 Washington Migrant Council	1/6/2010
Charles Cowan, MD (King)	Children's Hospital & Regional Medical Center 4800 Sand Point Way NE MS: M2-8 Seattle, WA 98105	Tel: 206-987-2204 Cell: 206-619-2422 Fax: 206-987-3824 Email: charles.cowan@seattlechildrens.org	#9 Service Provider Physician	1/6/2010
Victoria Crescenzi, MD (Kitsap)	Naval Hospital Bremerton One Boone Road Bremerton, WA 98312	Tel: 360-475-4216 Pager: 360-307-1447 Fax: 360-745-4801 Email: crescenziv@pnw.med.navy.mil	#20 Military	1/6/2011
Rene Denman (Island) (FLIC Chair)	Skagit Valley College 1900 SE Pioneer Way Oak Harbor, WA 98277	Tel: 360-679-1039 Fax: 360-679-6646 Email: rene.denman@skagit.edu	#2 Parent	1/6/2011
Representative Mary Lou Dickerson	36 th Legislative Dist. P.O. Box 40600 412 Legislative Bldg. Olympia, WA 98504-0600	Tel: 360-786-7860 Fax: 360-786-1247 Email: dickerso_ma@leg.wa.gov	#21 Legislature	Ex-Officio

MEMBER NAME	ADDRESS	TELEPHONE	POSITION # & CATEGORY	TERM EXPIRES
Melinda Dyer	Office Superintendent of Public Instruction (OSPI) P.O. Box 47200 Olympia, WA 98504-7200	Tel: 360-725-6050 Fax: 360-664-3631 Email: Melinda.dyer@k12.wa.us	#32 Office of the Coord. of Ed of Homeless Children & Youth	Ex-Officio
Sarah Fader (Thurston)	Dept of Social & Health Services (DSHS) 805 Plum Street SE Olympia, WA 98504	Tel: 360-725-1016 Fax: Email: fadersm@dshs.wa.gov	#1 Parent	1-6-2012
Steven Finch (Jefferson) (Funding Chair)	Grant Street Elementary 1637 Grant Street Port Townsend, WA 98368	Tel: 360-379-4535 Fax: 360-379-5139 Email: sfinch@ptsd50.org	#6 Service Provider School District	1/6/2011
Kathrin Fortner (Kitsap) (Data Chair)	Holly Ridge Center 5112 NW Taylor Road Bremerton, WA 98312	Tel: 360-373-2536 Cell: 360-271-1407 Fax: 360-373-4934 Email: kfortner@hollyridge.org	#29 Service Provider Neurodevelop. Center (NDC)	1/6/2011
Alan Garrels	Dept. of Services for the Blind 21019 NE 78 th St. Redmond, WA 98053	Tel: 425-836-0924 Cell: 206-919-0905 Fax: 425-836-0924 Email: alagarrels@dsb.wa.gov	#15 State Services for the Blind Agency	Ex-Officio
Marijean Holland	Office of the Insurance Commissioner P.O. Box 40255 5000 Capital Blvd. Tumwater, WA 98501	Tel: 360-725-7091 Fax: 360-586-2017 Email: MarijeanH@oic.wa.gov	#23 State Office of Insurance Commissioner	Ex-Officio
Christine Johnson (Kitsap)	Kitsap Community Resources 1201 Park Ave. Bremerton, WA 98337	Tel: 360-473-2078 Fax: 360-473-2114 Email: christinej@kcr.org	#30 Service Provider Head Start	1/6/2010

MEMBER NAME	ADDRESS	TELEPHONE	POSITION # & CATEGORY	TERM EXPIRES
Amy Kocher (Kittitas)	Ellensburg, WA 98926		#5 Parent	1-6-2010
Lisa LaRue	Department of Early Learning (DEL) PO Box 40970 Olympia, WA 98504	Tel: 360-725-4387 Cell: 360-280-3135 Fax: 360-413-3482 Email: lisa.larue@del.wa.gov	#26 State Child Care Agency (DEL)	Ex-Officio
Dennis Mathews (Klickitat)	ESD #112 2500 NE 65 th Ave. Vancouver, WA 98665	Tel: 360-750-7507 Cell: 360-921-4621 Fax: 360-906-1010 Email: dennis.mathews@esd112.org	#24 Service Provider Education	1/6/2011
Robin McIlvaine	Department of Social & Health Services (DSHS) Mental Health Division PO Box 45320 Olympia, WA 98504	Tel: 360-902-0802 Fax: 360-902-0809 Email: mcilvrt@dshs.wa.gov	#35 State Agency for Children's Mental Health	Ex-Officio
Maria Nardella	Department of Health (DOH) Children w/Special Health Care Needs (CSHCN) MS 47880 NM Industrial Bldg. 7 Tumwater, WA 98504-7880	Tel: 360-236-3573 Fax: 360-586-7868 Email: maria.nardella@doh.wa.gov	#16 State Health Agency	Ex-Officio
Diane Patterson (Yakima) (Services Co-Chair)	Children's Village 3801 Kern Road Yakima, WA 98902	Tel: 509-574-3267 Cell: 509-969-1844 Fax: 509-574-3210 Email: Diane.patterson@yvmh.org	#10 Service Provider Public Health	1/6/2010
Marie Preftes Arenz (Snohomish)	Deaconess Children's Services 4708 Dogwood Drive PO Box 2629 Everett, WA 98203	Tel: 425-350-8930 Fax: Email: mpreftes-arenz@deaconesschildren.org	#25 Parent	1-6-2012

MEMBER NAME	ADDRESS	TELEPHONE	POSITION # & CATEGORY	TERM EXPIRES
Sharon Reddick	Dept. of Social & Health Services (DSHS) Health and Recovery Services Administration (HRSA) P.O. Box 45530 Olympia, WA 98504-5530	Tel: 360-725-1656 Fax: 360-753-7315 Email: reddisl@dshs.wa.gov	#33 State Medicaid Agency	Ex-Officio
Linda Rolfe	Dept. of Social & Health Services (DSHS) Div. of Developmental Disabilities (DDD) P. O. Box 45310 Olympia, WA 98504-5310	Tel: 360-725-3461 Fax: 407-0955 Email: HoineDA@dshs.wa.gov	#17 State Lead Agency	Ex-Officio
Bonnie Sandahl (Snohomish) (SICC Chair)		Contact Linda Jennings 360-725-3514 jennill@dshs.wa.gov	#8 Service Provider	1/6/2011
T Simmons	Dept. of Social & Health Services (DSHS) Children's Administration P.O. Box 45710 Olympia, WA 98504-5710	Tel: 253-983-6238 Cell: 253-226-7307 Fax: 360-902-7903 Email: sitz300@dshs.wa.gov Tas4@comcast.net	#34 State Child Welfare Agency for Foster Care	Ex-Officio
Kristine Slentz (Whatcom) (Personnel & Training Chair)	Western WA University Special Ed Department Miller Hall 318B MS: 9090 Bellingham, WA 98225	Tel: 360-650-3724 Fax: 360-650-4992 Email: kris.slentz@wwu.edu	#28 Higher Education	1/6/2011
Janet Spybrook (Kittitas)	Central Washington University 400 E University Way Ellensburg, WA 98926-7409	Tel: 509-963-1861 Fax: 509-963-1162 Email: Spybrook@cwu.edu	#11 Personnel Preparation	1-6-2012

MEMBER NAME	ADDRESS	TELEPHONE	POSITION # & CATEGORY	TERM EXPIRES
Tiffany Wheeler-Thompson (Island)	4947 Spinnaker Drive Freeland, WA 98249	Tel: 425-343-5799 Email: zoefoundation@whidbey.com	#4 Parent	1/6/2010
Dawn Williams (King)	Region 10 Head Start/Early Head Start 2201 Sixth Ave., MS-71 Seattle, WA 98121	Tel: 425-877-1174 Fax: Email: williams_dawn2@bah.com	#27 Head Start Agency	1/6/2009
Dani Wykes (Pierce) (Services Co-Chair)	Lake Tapps, WA 98391		#3 Parent	1/6/2011
Vacant Position #7			#7 Service Provider Developmental Center	Vacant
Vacant Position #14			#14 Tribal	Vacant
Vacant #18			#18 State Community Development Agency (DEL)	Ex-Officio
Vacant Position #19			#19 Bureau of Indian Affairs	Vacant
Vacant #31			#31 Parent	Vacant

⌚ A term of appointment is defined by the position, not by the date the Governor makes the appointment. If a member resigns before completing a term, a new member may be appointed to serve out the remainder of that term. Executive and Legislative appointees shall be Ex-Officio Members. Members may serve two three (3) year terms.

SICC Summary of Membership Categories

Parents	7
Personnel Preparation	2
Service Providers	8
State Agency Representatives	8
State Insurance Commissioner	1
State Legislature	1
Other	
Bureau of Indian Affairs	1
County Human Services	1
Education	1
Head Start	1
Military Representative	1
Office of Child Care Policy	1
Tribal Representative/Service Provider	1
Washington Migrant Council	1
TOTAL:	35

GARY LOCKE
Governor



STATE OF WASHINGTON
OFFICE OF THE GOVERNOR

P.O. Box 40002 • Olympia, Washington 98504-0002 • (360) 753-6780 • TTY/TDD (360) 753-6466

EO – 01-04

EXECUTIVE ORDER

**ESTABLISHING THE STATE INTERAGENCY COORDINATING COUNCIL
FOR INFANTS AND TODDLERS WITH DISABILITIES AND THEIR FAMILIES**

WHEREAS, the federal Individuals with Disabilities Education Act (IDEA), Part C (34, CFR, Part 303), and Revised Code of Washington 70.195, Early Intervention Services---Birth to Six, both require a State Interagency Coordinating Council for Infant and Toddlers with Disabilities and Their Families appointed by the Governor;

WHEREAS, Washington continues to participate in the federal Individuals with Disabilities Education Act (IDEA), Part C;

WHEREAS, a Council is required to advise and assist the Department of Social and Health Services in achieving the full participation, coordination and cooperation of the Department of Health, Office of the Superintendent of Public Instruction, Department of Services for the Blind, Office of Community Development and other participating agencies in the implementation of the statewide early intervention system;

WHEREAS, a Council is required to advise and assist the Department of Social and Health Services and the other participating state agencies on a broad range of policy and coordination issues on early intervention;

NOW, THEREFORE, I, Gary Locke, do hereby confirm the establishment of the Washington State Interagency Coordinating Council for Infants and Toddlers with Disabilities and Their Families in accordance with the 1997 amendments to IDEA.

1. **Council Membership:**

The Governor shall appoint members of the Council, and the Governor shall designate the chair or co-chairpersons of the Council. The Council shall be composed of at least 25 members. State executive and legislative appointees shall be ex-officio, non-voting members and shall not be designated as chair or co-chairperson. Terms of membership shall be three years. Members may be appointed for two consecutive terms. If a member resigns before completing a term, a new member may be appointed to serve out the remainder of that term.

To achieve a balanced membership on the Council, appointments shall be made with consideration given to geographic representation, gender, and ethnic and cultural diversity and a variety of delays, disabilities or diagnoses of children represented by family/parent members.



Membership of the Council shall be as follows:

- A. At least twenty percent of the members shall be parents of infants, toddlers or children aged twelve or under with disabilities. These members shall have knowledge of or experience with programs for infants, toddlers, and children with disabilities. At least one of the members shall be a parent of an infant, toddler, or child with a disability aged six or younger.
- B. At least twenty percent of the members shall be public or private providers of early intervention services.
- C. At least one member shall be involved in training personnel providing early intervention services.
- D. The Washington State Departments of Health, Social and Health Services, Services for the Blind, the Office of the Superintendent of Public Instruction, Office of Community Development, and the Office of the Insurance Commissioner shall each be represented by at least one non-voting member.
- E. At least one non-voting member shall be from the State Legislature.
- F. A member from the Head Start agency or program.
- G. A member from the State agency responsible for child care.
- H. Other members may include representatives from other appropriate areas such as the Bureau of Indian Affairs, Indian Health Services, or military.

2. Role of the Council:

- A. The Council shall advise and assist the Department of Social and Health Services and other participating state agencies in coordinating and implementing policies that constitute the statewide system of early intervention services, including:
 - 1. Identifying sources of fiscal and other support for early intervention services;
 - 2. Assigning financial responsibilities to the appropriate agency;
 - 3. Promoting interagency agreements;
 - 4. Providing appropriate services for children.
- B. The Council shall advise and assist the Office of Superintendent of Public Instruction on the transition of toddlers with disabilities to preschool services provided under Part B, and other appropriate services.
- C. The Council may advise and assist the Department of Social and Health Services and the Office of the Superintendent of Public Instruction regarding the provision of appropriate services for children from birth through age 5.

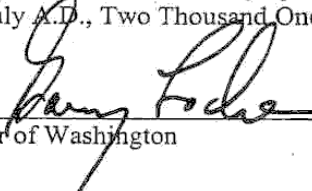
- D. The Council may advise and assist appropriate agencies on the integration of services for infants and toddlers with disabilities and at risk infants and toddlers and their families.
 - E. The Council shall advise and assist the Department of Social and Health Services and other participating agencies in achieving the full participation, coordination, and cooperation of all appropriate public agencies in the state.
 - F. The Council shall assist the Department of Social and Health Services in effective implementation of the statewide early intervention system by establishing a process that includes:
 - 1. Seeking information from service providers, family resources coordinators, parents, and others about any federal, state, or local policies that impede timely service delivery;
 - 2. Taking steps to ensure that any policy problems are resolved.
 - G. To the extent appropriate, the Council shall assist the Department of Social and Health Services in resolving disputes relating to this program.
 - H. The Council shall work with county early childhood interagency councils to coordinate and enhance existing early intervention services and assist communities to meet the needs of infants and toddlers with disabilities and their families.
 - I. The Council shall advise and assist the Department of Social and Health Services in preparing applications for federal grants under IDEA, Part C.
 - J. The Council may advise and assist the Department of Social and Health Services in preparing budgets as necessary to carry out the Council's functions.
 - K. The Council shall prepare all reports to the Governor and federal officials as required by federal and state laws.
3. Meetings and Other Business:
- A. The Council shall meet at least quarterly and in such places as it deems necessary.
 - B. The Council shall conduct official business only when a quorum is present.
 - C. No member of the Council may cast a vote on any matter that would provide direct financial benefit to that member or otherwise give the appearance of a conflict of interest.
 - D. The Department of Social and Health Services shall be the designated lead agency and shall provide administrative and staff support to the Council.
 - E. The Council, its activities and administrative support, and membership appointments shall be funded exclusively from and are contingent upon monies received under federal IDEA, Part C.

F. Members may be reimbursed for expenses incurred in the performance of their duties in accordance with RCW 43.03.050 and 43.03.060 and the Department of Social and Health Services policies. Parent representatives may also be reimbursed for necessary child care.

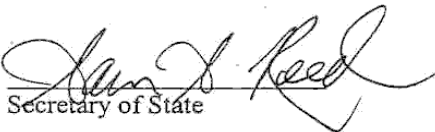
4. This order supercedes Executive Order 92-10 and shall take effect immediately.



IN WITNESS WHEREOF, I have hereunto set my hand and caused the seal of the State of Washington to be affixed at Olympia this 6th day of July A.D., Two Thousand One.


Governor of Washington

BY THE GOVERNOR:


Secretary of State

D. Part C Federal Funding Categories (Budget)

1. Description of Use of Part C Funds for the Lead Agency

When completing this section include:

- Totals for the number of lead agency administrative positions, salaries and fringe benefits funded either 100 percent and/or less than 100 percent with Part C funds;
- A general description of the duties which the positions entail; and
- A subtotal of the amount.

Identify any administrative positions for which less than 100% of the time is spent on Part C and, for each such position, indicate the percentage of time spent on Part C and the total amount of salary and fringe benefits included in the Part C application budget.

Positions Funded	Number of Positions	% of Time Spent on Part C	Salaries & Fringe Benefits	Description of Duties
100% funded with Part C Funds	14.0 FTE	100%	\$794,569	<p><u>Program Director/DDD Office Chief:</u> Serves as Part C Coordinator to administer the implementation of statewide early intervention services, providing fiscal and program supervision. Maintains federal communication and coordination, providing federally required reports, and ensuring compliance with IDEA, Part C. Provides technical assistance, coordination, and clarification of IDEA, Part C, regulations to the Governor's Office, other state agencies, local lead agencies, families, and stakeholders.</p> <p><u>Assistant Program Director:</u> Draft, review, and revise program standards, policies and procedures, identify issues and promote strategies and clarifications. Lead staff for preparation of the State Performance Plan (SPP); the Annual Performance Report (APR); and local determinations reviews and annual process. Represent the Program Director, as assigned. Lead staff for program consultants; for the State Interagency Coordinating Council and its committee activities. Oversees ITEIP audit process, site verification visits, and data collection. Provides training and technical assistance for federal rules and regulations. Assist with development and administration of the annual federal grant application.</p>

Positions Funded continued	Number of Positions	% of Time Spent on Part C	Salaries & Fringe Benefits	Description of Duties continued
100% funded with Part C Funds		100%		<p><u>Administrative Assistant 4:</u> Administrative support to Program Director and Assistant Program Director. Lead staff for program support and office operations, personnel activities, legislative coordination and assignment tracking. Review and coordinate program correspondence, reports, and archiving; coordinate website updates; track and maintain administrative policies and procedures. Coordinate all travel and conference registrations for Program Director. Maintain program work plan and related documents. Coordinate special projects.</p> <p><u>Administrative Assistant 3:</u> Provide support for the State Interagency Coordinating Council (SICC) and working committees; maintain SICC records and files. Administrative and general support for the program, special projects. Maintain and distribute program information and track ITEIP website needs. Coordinate and compile the Family Survey; and program electronic mail distribution. Ensure accuracy of travel documentation for staff and SICC members.</p> <p><u>Office Assistant 3:</u> Reception and phones; electronic file maintenance. General program support, as assigned by the Administrative Assistant 4. Maintain correspondence logs, master, reference, and resource files. Website review.</p> <p><u>Program Consultants:</u> Provide training and technical assistance to the contracted local lead agencies on the federal IDEA, Part C requirements, the State Performance Plan Indicators, and Annual Performance Report. Monitor contractor performance, by providing desk audits, data analysis, technical assistance, training, and contract management of the contracted local lead agencies, in assigned geographic areas. Review state legislative bills; provide analysis of impact on the program. Assist with policies development, review, analysis, and implementation.</p>

Positions Funded continued	Number of Positions	% of Time Spent on Part C	Salaries & Fringe Benefits	Description of Duties continued
100% funded with Part C Funds		100%		<p><u>Data Manager:</u> Serve as the ITEIP Data Management System lead specialist. Oversee and monitor the ITEIP Data Management System; provide early intervention information technology, data extraction, data analysis, and reports. Attend and/or provide presentations at the national data conferences. Manage the ITEIP data system maintenance contract, data sharing agreements, and serve as liaison between ITEIP and Aging & Disability Services Administration (ADSA) Information Systems. Provide technical assistance and training to contractor local lead agencies.</p> <p><u>Assistant Data Manager:</u> Provide support for the ITEIP Data Management System, the Data Manager, and staff. Perform research, statistical, and data analysis, report development. Assist in IT system management and quality assurance. Provide federally required data for the 618 Reports, Annual Performance Plan (APR) and the State Performance Plan (SPP). Provide training to local lead agencies related to the ITEIP Data Management System.</p> <p><u>Program Fiscal Manager:</u> Develop, produce and maintain ITEIP financial reports. Maintain and track program budget, fiscal reports, and spreadsheets; track expenditures, and monitor the federal draw. Lead staff for the Fiscal Analyst 1 and Fiscal Analyst 3 program activities related to federal and state fiscal policies and procedures. Provide fiscal and technical assistance to contractors and program staff. Serve as fiscal liaison between the DSHS Financial Services Administration (FSA), ADSA Financial and Budget Offices. Serve as special projects fiscal assistant to the Program Director.</p> <p><u>Fiscal Analyst 3:</u> Primary staff responsible for the contracting process and tracking of related activities; develop, maintain, and distribute contract documents, records, and files. Coordinate contract activities between DSHS Central Contracts Services and ITEIP. Provide contract technical assistance to</p>

Positions Funded continued	Number of Positions	% of Time Spent on Part C	Salaries & Fringe Benefits	Description of Duties continued
100% funded with Part C Funds		100%		<p>contractors and program staff. Primary staff for grant application activities; and track and assist with Annual Performance Report submission activities. Monitor audit activities, prepare reports for review.</p> <p><u>Fiscal Analyst 1:</u> Track contractor fiscal expenditures, payments, ensuring contract files are updated and complete. Prepare and maintain contractor fiscal tracking reports and monitoring spreadsheets. Order, monitor, and maintain program supplies. Maintain the ITEIP database and assist with electronic information distribution.</p>
			\$251,566	<u>Staff Benefits:</u> Staff Benefits are calculated at 31.66% of the Salaries.
Subtotal of amount under A:			\$1,046,135 (12.307% of total Grant Award)	

2. Maintenance and Implementation Activities for the Lead Agency

When completing this section include:

- A description of the nature and scope of each major activity to be carried out under Part C in maintaining and implementing the Statewide system of early intervention services. Activities could include enhancing the Comprehensive System of Personnel Development, implementing child find strategies, or ensuring a timely, comprehensive, multidisciplinary evaluation for each child;
- The approximate amount of funds to be spent for each activity; and
- A subtotal of the amount.

(Add columns and rows as needed.)

Major Activity	Part C Funds to be Spent	Description of Activities
Goods & Services	\$124,177	Services include some of the following: <ul style="list-style-type: none">• Copies/printing; phones/fax/TTY; postage/mail; repairs to equipment; general supplies; publication/books; training materials; archiving; equipment and computer replacement; staff development; interpreter/language services; and meeting space rental (not SICC)• Staff travel expenses to monitor contracts, provide technical assistance and training statewide to contractors, families, and community members; to attend SICC subcommittee meetings; and intra- and interagency coordination activities
Subtotal of amount under B:	\$124,177 (1.461% of total Grant Award)	

3. Description of Use of Part C Funds for the Interagency Coordinating Council (ICC)

When completing this section include:

- Totals for the number of ICC administrative positions, salaries and fringe benefits funded either 100 percent and/or less than 100 percent with Part C funds;
- A general description of the duties which the positions entail; and
- A subtotal of the amount.

Identify any administrative positions for which less than 100% of the time is spent on Part C and, for each such position, indicate the percentage of time spent on Part C and the total amount of salary and fringe benefits included in the Part C application budget.

Positions Funded	Number of Positions	% of Time Spent on Part C	Amount of Salaries & Fringe Benefits	Description of Duties
100% funded with Part C Funds				Program provides support through existing ITEIP staff
< 100% funded with Part C Funds				
Subtotal of amount under C:				

4. Maintenance and Implementation Activities for the Interagency Coordinating Council (ICC)

When completing this section include:

- A description of the nature and scope of each major activity to be carried out under Part C in maintaining and implementing the Statewide system of early intervention services. Activities could include coordinating child find identification efforts, ensuring the timely provision and payment of early intervention services to eligible children and their families, advising on early childhood transition, support for the ICC (travel), or other implementation and development activities of the SICC;
- The approximate amount of funds to be spent for each activity; and
- A subtotal of the amount.

(Add columns and rows as needed.)

Major Activity	Part C Funds to be Spent	Description of Activities
State Interagency Coordinating Council (SICC) Meetings	\$15,000	<p>SICC General Description of Activities:</p> <p>To support activities of the State Interagency Coordinating Council (SICC) and the standing committees. The SICC and committees meet at least quarterly. The SICC advises and assists DSHS (the state lead agency), the Infant Toddler Early Intervention Program (ITEIP), and the other participating state agencies in the implementation of the statewide early intervention system</p> <p>Per diem, lodging, airfare and airfare fees, private mileage, and child care; meals with working meetings; conference calls, printing, photocopying, interpreter services, meeting room/facility expenses</p> <p>NOTE: State Department of Social and Health Services, Infant Toddler Early Intervention Program provides the State Interagency Coordinating Council (SICC) and its committees staff support through positions defined in Section III.A above.</p>
Subtotal of amount under D:	\$15,000 (0.176% of the Grant Award)	

5. Direct Services (Funded by Part C Federal Dollars)

When completing this section include:

- A description of any direct early intervention service that the State lead agency expects to provide to eligible children and their families with funds under this part, including a description of any services provided to at-risk infants and toddlers and their families for States that provide services to at-risk children as part of its eligibility criteria. The description must include information about each type of service to be provided, including:
 - A summary of the methods to be used to provide the service (e.g., contracts or other arrangements with specified public or private organizations); and
 - The approximate amount of funds under this part to be used for the direct provision of early intervention services.

Provide subtotals of the amount and for salaries and fringe benefits for direct service employees (discipline). *(Add columns and rows as needed.)*

Direct Service	Part C Funds to be Spent	Summary of Methods to be Used to Provide Service
Direct Services Contracts to Provide the Following Services: Assistive Technology Services/Devices; Audiology; Family Resources Coordination (Service Coordination); Family Training, Counseling, Home Visits, Other Support; Health; Medical; Nursing; Nutrition; Occupational; Physical Therapy; Psychological; Social Work; Special Instruction; Speech-Language Pathology; Transportation and Related Costs; Vision; and Other Early Intervention Services.	\$6,680,071	To enhance local direct services for required activities, during the period of October 1, 2009 through September 30, 2010. Each local county or geographic area contracted funding is based on an equitable distribution formula.

Direct Service continued	Part C Funds to be Spent	Summary of Methods to be Used to Provide Service
Mediation	\$30,000	Funds for the mediation system, consistent with the requirements of IDEA, Part C, and supporting mediation activities
Data Collection/Accountability	\$164,651	Funds required to support, update, and maintain the ITEIP Data Management System; ensure state and federal data reports are compiled and reported, as required and requested
Monitoring	\$78,000	To support the Department of Social and Health Services (DSHS) statewide general supervision monitoring activities, as required in IDEA, Part C
Low Incidence Sensory Disabilities	\$15,000	Funds to enhance statewide resources, referrals, and access to early intervention services, for infants and toddlers with low-incidence sensory disabilities and their families
Autism Outreach	\$15,000	Funds to enhance statewide resources, referrals, and access to early intervention services, for infants and toddlers with autism and their families
Family Resource Coordinator Training	\$160,794	<p>To maintain statewide training for Family Resources Coordinators (FRCs). Training ensures that FRCs have the knowledge and understanding of eligibility requirements for infants and toddlers; IDEA, Part C federal regulations, the state of Washington's policies and procedures, and other local and state resources and services available for eligible infants, toddlers, and their families</p> <p>Training topics include, but are not limited to basic service coordination expectations for this state's Family Resources Coordination System; ITEIP Part C early intervention requirements; parents rights and confidentiality; understanding service delivery systems; developing and</p>

Direct Service continued	Part C Funds to be Spent	Summary of Methods to be Used to Provide Service
Family Resource Coordinator Training continued		implementing Individualized Family Service Plans (IFSPs); relationship building and family – professional partnerships; outreach to local professionals, not-for-profit agencies, and governments
Early Intervention Professional Development	\$70,000	Provide technical assistance and training based upon local lead agency corrective action plan data. Review and revise technical assistance plan and materials annually
Parent Participation Coordination	\$72,180	To Support Statewide Parent Participation Coordination, including provide technical assistance, training, and information regarding parent participation in the IDEA early intervention services; assist in recruiting and training parent representatives for the State Interagency Coordinating Council and its related activities, with an emphasis on diversity; assist and facilitating active parent/family involvement and input to and from the SICC and ITEIP; and providing training and technical assistance to County Interagency Coordinating Councils on ITEIP Part C early intervention, parent participation, and parent perspective; assist with family involvement in the SICC sponsored Conversation with Families; provide scholarships for parents/families to attend the annual Infant Early Childhood Conference.
Child Profile	\$9,100	Provide developmental milestone and referral inserts, in packets distributed, three times a year, to all families with newborns in Washington State
Public Awareness/ Central Directory	\$20,000	Public Awareness materials for statewide distribution, including the Within Reach 1-800 number hotline. The hotline includes referral services for all disabling conditions, experts available in the state, and research and demonstration projects. The hotline is available to families, professionals, services providers, and other interested parties

Direct Service continued	Part C Funds to be Spent	Summary of Methods to be Used to Provide Service
Subtotal of amount under E:	\$7,314,796 (86.1% of Grant Award)	

Direct Service Employees (Discipline)	Salary and Fringe	% Part C	Description of Duties
			Not Applicable
Sub Total:	-0-		

6. Description of Optional Use of Part C Funds (For States that Do Not Provide Direct Service for At-Risk Infants and Toddlers)

For any State that does not provide direct services for at-risk infants and toddlers under 20 U.S.C. 1437(a)(4), but chooses to use funds under 20 U.S.C. 1438(5), each Application must include a description of how these funds will be used. Specifically, a State may use Part C funds for initiating, expanding, or improving collaborative efforts related to at-risk infants and toddlers, including establishing linkages with appropriate public or private community-based organizations, services, or personnel for the purpose of:

- Identifying and evaluating at-risk infants and toddlers;
- Making referrals of at-risk infants and toddlers who are identified and evaluated; and
- Conducting periodic follow-up on at-risk infants and toddlers to determine if the status of the infant or toddler's eligibility for Part C services has changed.

Provide a subtotal of the amount. *(Add columns and rows as needed.)*

Description of Activity	Description of Activity	Amount of Funds
NOT APPLICABLE	NOT APPLICABLE	-0-
Subtotal of amount under F:	Subtotal of amount under F:	-0-

7. Activities by Other Agencies

If other State or local public agencies are to receive a portion of the Federal funds under Part C, the Application must include:

- The name of each public agency expected to receive funds;
- The approximate amount of funds each public agency will receive; and
- A summary of the purposes for which the funds will be used.

Provide subtotal of amount. *(Add columns and rows as needed.)*

Agency Receiving Funds	Amount of Funds	Purpose
N/A		NOT APPLICABLE
Subtotal of amount under G:	-0-	

8. Totals

Enter the subtotal amounts for Sub Sections A-G found in Section III and any indirect costs charged as specified in Section IV.B. The sub total amounts (Rows 1-8) should total the estimated grant application amount. (A State may apply for less than the full estimated allotted amount.)

Enter the subtotal amounts for Sub Sections A-G found in Section III of this application.		
Row No.	Section	Amount
1.	III.A. Lead Agency Salaries & Benefits	\$1,046,135
2.	III.B. Maintenance and Implementation	\$124,177
3.	III.C.	\$0.00
4.	III.D. State Interagency Coordinating Council	\$15,000
5.	III.E. (Direct Service) Early Intervention Services, Mediation, Data Collection and Accountability, Monitoring, Low Incidence Sensory Disabilities, Autism Outreach	\$7,314,796
	III.E. (Direct Service Employees)	\$0
6.	III.F.	\$0
7.	III.G.	\$0
Enter any Indirect Costs Charged (See Section IV.B of this application.)		
8.	IV.B	\$0
Total (Rows 1-8)		\$8,500,108

E. Parent Participation

The State Lead Agency and State Interagency Coordinating Council (SICC) support parent participation in policy development and implementation in many ways, including membership of parents on the State Interagency Coordinating Council, SICC working committees, and County Interagency Coordinating Councils (CICC). Each parent member on the SICC receives training and orientation on IDEA, policy development, history of Washington State early intervention services, and the State Interagency Coordinating Council.

In addition, the Parent Participation Coordinator position was established in 1987 to assist in achieving the goal of parent involvement, at all levels of early intervention service implementation. The Parent Participation Coordinator facilitates opportunities for parents to be involved in the development and implementation process at the local, state, and national level. The coordinator's responsibilities include:

1. Providing technical assistance and consultation to parents on IDEA Early Intervention Services.
2. Assisting in recruiting and training parent representatives for the State Interagency Coordinating Council and its related activities, with an emphasis on diversity.
3. Assisting and facilitating active parent/family involvement and input to and from the SICC.
4. Providing training and technical assistance to County Interagency Coordinating Councils, service providers, state agencies, and others, regarding family-centered care, parents' roles in IDEA Early Intervention, parent participation, and parent perspectives.

F. Equitable Distribution of Resources

In order to assure an equitable distribution of resources, contracts are issued to a local lead agency serving a specific geographic service area, within the state. All geographic areas have access to early intervention services with these contracted agencies.

In distributing available resources, consideration is given to the relative numbers of infants and toddlers with disabilities residing in each geographic area, as well as the availability and accessibility of necessary and appropriate services within those areas. In addition, elements considered to determine funding for a designated area are factors of population density, economic condition, military impacts, urban and rural indicators, and Tribal and other ethnic diversity.

The Washington State funding formula includes the elements and factors identified above and account for need, across all geographic areas of the state. Since both the federal and state legislation contain non-supplanting language, contractors are required to assure funds enhance existing services and/or provide new services.

The early intervention service contracts are negotiated, on a non-competitive basis, to assure each of the federally required components and early intervention services are available statewide. County Interagency Coordinating Councils (CICCs), agencies, and local providers, within each geographic area, work together to determine which is the most appropriate local agency to apply to be the early intervention services contractor.

ITEIP issues an Announcement of Funds for early intervention services and CICCs, as funds become federally available. Announcements state the intended use of the funds and are mailed to approximately 1300 agencies and individuals.

Applicants for early intervention services funds must submit:

- Evidence of support from members of the CICCs in their geographic service area.
- A budget for how the funds will be expended.
- A current Early Intervention Services Plan and Interagency Agreement(s).

Tribal governments are encouraged to apply directly with ITEIP, or they may choose to subcontract directly with those early intervention services contractors. In addition, the Washington State Migrant Council provides contracted outreach and Family Resources Coordination for migrant families within several counties, as an enhancement to services provided by early intervention services contractors.

The minimum criteria for CICC application for funds are:

- Evidence of community support from community members, such as parents, early intervention service providers, school districts, health departments/districts, DSHS, Tribal governments, mental health agencies, Washington State Migrant Council, and the military.

- Evidence of support for the local lead agency who agrees to implement the work order.
- Evidence of involvement or attempts to involve community members on the CICC, such as those listed above.

Only one non-competitive application will be accepted for each designated geographic/county service area. A geographic area/county may cluster with one or more adjoining geographic areas/counties, if it is mutually agreeable. If multiple applications are submitted for the same area, all application received are returned to the senders for development of one application for re-submittal. If there are situations that indicate the need for more than one early intervention services lead agency contract per designated geographic/county service area, applicants must contact ITEIP for contract negotiation and approval prior to submitting the application(s).

G. Adoption of Policy on Statewide System

The State Lead Agency assures that Washington's early intervention system is in effect and the early intervention services (see definition section) are provided to eligible infants and toddlers with disabilities and their families annually, as long as the state participates in the federal IDEA early intervention program. The state of Washington and State Lead Agency understands, per the January 13, 1992 letter from the Office of Special Education Programs, that there is no obligation to continue participation beyond each year's grant application.

H. Annual Report Certification of the State ICC

ANNUAL REPORT CERTIFICATION OF THE INTERAGENCY COORDINATING COUNCIL UNDER PART C OF THE INDIVIDUALS WITH DISABILITIES EDUCATION ACT (IDEA)

Under IDEA Section 641 (e)(1)(D) and 34 CFR §303.654, the Interagency Coordinating Council (ICC) of each jurisdiction that receives funds under Part C of the IDEA must prepare and submit to the Secretary of the U.S. Department of Education (Department) and to the Governor of its jurisdiction an annual report on the status of the early intervention programs for infants and toddlers with disabilities and their families operated within the State. The ICC may either: (1) prepare and submit its own annual report to the Department and the Governor, or (2) provide this certification with the State lead agency's Annual Performance Report (APR) ¹ under Part C of the IDEA. This certification (including the annual report or APR) is due no later than February 2, 2009.

On behalf of the ICC of the State/jurisdiction of Washington, I hereby certify that the ICC is:
[please check one]

1. ☐ Submitting its own annual report (which is attached); or
2. ☒ Using the State's Part C APR for FFY 2005 in lieu of submitting the ICC's own annual report. By completing this certification, the ICC confirms that it has reviewed the State's Part C APR for accuracy and completeness.²

I hereby further confirm that a copy of this Annual Report Certification and the annual report or APR has been provided to our Governor.

Kathrin Fortner for Bonnie Sandahl 1-29-09
Signature of ICC Chairperson Date

Bonnie Sandahl
by Kathrin Fortner, Data Comte. Chair and Steering Comte. Member
C/O Sandy Loerch Morris, Program Director
Infant Toddler Early Intervention Program
P.O. Box 45201
Olympia, WA 98504-5201

360-725-3516
Daytime telephone number

Note: The ICC Chair's address/phone is personal. Therefore, the state office address/phone is being used.

¹ Under IDEA Sections 616(b)(2)(C)(ii)(II) and 642 and under 34 CFR §80.40, the lead agency's APR must report on the State's performance under its State performance plan and contain information about the activities and accomplishments of the grant period for a particular Federal fiscal year (FFY).

² If the ICC is using the State's Part C APR and it disagrees with data or other information presented in the State's Part C APR, the ICC must attach to this certification an explanation of the ICC's disagreement and submit the certification and explanation no later than February 2, 2009.

I. 618 Data Reports – Tables 1 and 2 for December 1 Count



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES

January 30, 2009

William Knudsen, Acting Director
Office of Special Education Programs
U.S. Department of Education
Part C Data Reports
Program Support Services Group
Mail Stop 2600
550 12th Street, Southwest
Washington, D.C. 20202-2642

Dear William:

Enclosed are Tables One and Two, for December 1, 2008, including the Year-to-Year Change Reports, required by February 1, 2009. The data is collected and submitted annually to the Office of Special Education Programs (OSEP), as required by the Individuals with Disabilities Education Act (IDEA), Part C.

Washington continues to collect race or ethnicity information that includes "Multi-Racial and family "Does not wish to provide" categories to best reflect information reported by families. Contractors and providers may only report "Multi-Racial" by selecting two or more of the existing race or ethnicity categories, as reported by the family.

ITEIP will continue to report and collect data according to how families self-identify, using the "Multi-Racial" category for those families who choose not to report as any single race or ethnicity. Washington State also reports when a family "Does not wish to provide", as it is a constitutional right not to have to disclose race/ethnicity.

If you have any questions regarding the attached reports, please contact me, at (360) 725-3516. Thank you.

Sincerely,

Sandy Loefer Morris, Program Director
Infant Toddler Early Intervention Program

Enclosures

cc: Jackie Twining-Martin, Project Officer, Office of Special Education Programs
Tammy Barnhill-Proctor, Project Officer, Office of Special Education Programs
Bonnie Sandahl, Chair, State Interagency Coordinating Council
Kathy Leitch, Assistant Secretary, Aging and Disabilities Services Administration
Kathy Marshall, Director, Management Services Division
Linda Rolfe, Director, Division of Developmental Disabilities
Mary Job, Research Analyst, Westat



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Voice 360-725-3500
<http://www1.dshs.wa.gov/iteip>



Washington State
Department of Social
& Health Services

ADSA Aging & Disability
Services Administration





STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES

January 30, 2009

Mary Job, via IDEADData_PartC@WESTAT.com
Westat
1650 Research Boulevard, RA 1205
Rockville, Maryland 20850-3159

Dear Mary:

Enclosed are Tables One and Two, for December 1, 2008, including the Year-to-Year Change Reports, required by February 1, 2009. The data is collected and submitted annually to the Office of Special Education Programs (OSEP), as required by the Individuals with Disabilities Education Act (IDEA), Part C.

Washington continues to collect race or ethnicity information that includes "Multi-Racial and family "Does not wish to provide" categories to best reflect information reported by families. Contractors and providers may only report "Multi-Racial" by selecting two or more of the existing race or ethnicity categories, as reported by the family.

ITEIP will continue to report and collect data according to how families self-identify, using the "Multi-Racial" category for those families who choose not to report as any single race or ethnicity. Washington State also reports when a family "Does not wish to provide", as it is a constitutional right not to have to disclose race/ethnicity.

Please send a response verifying that you have received these reports in a timely manner. If you have any questions regarding the attached reports, please contact me, at (360) 725-3516. Thank you.

Sincerely,

Sandy Lorch Morris, Program Director
Infant Toddler Early Intervention Program

Enclosure

cc: William Knudsen, Acting Director, Office of Special Education Programs
Jackie Twining-Martin, Project Officer, Office of Special Education Programs
Tammy Barnhill-Proctor, Project Officer, Office of Special Education Programs
Bonnie Sandahl, Chair, State Interagency Coordinating Council
Kathy Leitch, Assistant Secretary, Aging and Disabilities Services Administration
Kathy Marshall, Director, Management Services Division
Linda Rolfe, Director, Division of Developmental Disabilities



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Washington State
Department of Social
& Health Services

ADSA Aging & Disability
Services Administration



U.S. DEPARTMENT OF EDUCATION OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES OFFICE OF SPECIAL EDUCATION PROGRAMS	TABLE 1 REPORT OF CHILDREN RECEIVING EARLY INTERVENTION SERVICES IN ACCORDANCE WITH PART C	PAGE 1 OF 4
	OMB NO.: 1820-0557	
	FORM EXPIRES: 11/30/2009	
	STATE WA - WASHINGTON	
	Date between October 1, 2008 - December 1, 2008	
	SECTION A	

U.S. DEPARTMENT OF EDUCATION OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES OFFICE OF SPECIAL EDUCATION PROGRAMS	TABLE 1	REPORT OF INFANTS AND TODDLERS RECEIVING EARLY INTERVENTION SERVICES IN A COORDANCE WITH PART C	STATE: WA - WASHINGTON	COMMENTS
		Date between October 1, 2008 - December 1, 2008		
		COMMENTS		
Table 1, Section A.1. The following data should be included in the Computed Total on Page 1 for Washington State				
Multi Racial:	428			
Does Not Wish to Provide:	338			
Sub-total:	766			
Page 1 Lines 1-5 Computed Total:	4,140			
Grand Total:	4,906 Day-in-time Count			
Table 1, Section A.2. Washington State Early Intervention Program does not provide services for children over the age of 3				
Table 1, Section B.2. Washington State Early Intervention Program does not provide services for children over the age of 3				
Table 1, Section C Washington State Early Intervention Program does not provide services for at-risk infants and toddlers				
Significant Year-to-Year Change Report				
Please see "Table 1-A, E, & G Changes" tab of the workbook				

Year-to-Year Change Report					
Table 1 Section A Report of Children Receiving Services			Flag: The criteria for year-to-year change is a difference of 10% and 10 children.		
Date: December 1, 2008			WA-Washington State		
A.1. Age & Race/Ethnicity of Infants and Toddlers, Ages Birth Through Two					
	Day-in-time Dec 1 Count		Difference		
Age	2007	2008	Number	Percent	Flag
Birth to One	458	410	-48	-10%	Yes
One to Two	1396	1555	159	11%	Yes
Two to Three	2719	2941	222	8%	
Totals	4573	4906	333		
The 10 percent decrease in the number of children Birth to One may be attributed to recent Department of Health Statical findings of the decrease in number of births from 2006 to 2007.					
The 11 percent increase in the number of children One to Two is due to increased Child Find activities. This also reflects overall increases in the number of children served in the State of Washington.					
	Day-in-time Dec 1 Count		Difference		
Race/Ethnicity	2007	2008	Number	Percent	Flag
American Indian or Alaska Native	119	107	-12	-10%	Yes
Asian or Pacific Islander	237	277	40	17%	Yes
Black (Not Hispanic)	145	171	26	18%	Yes
Hispanic	776	863	87	11%	Yes
White (Not Hispanic)	2621	2722	101	4%	
Totals	3898	4140	242		
The 10 percent decrease in the number of American Indian/Alaska Native infants and toddlers, and their families, served may be attributed to recent Department of Health Statical findings of the decrease in number of births for 2006 to 2007. The records show in 2005 to 2006 birth rate increased 130 and in 2006 to 2007 the increase was 117 and overall decrease of 1 percent.					
The 17 percent increase in the number of Asian/Pacific Islander infants and toddlers, and their families, served could be due to increased Child Find activities.					
The 18 percent increase in the number of Black/African American infants and toddlers, and their families, served could be due to increased Child Find activities.					
The 11 percent increase in the number of Hispanic American infants and toddlers, and their families, served could be due to increased Child Find activities.					
B.1. Gender of Infants and Toddlers, Ages Birth Through Two, Receiving EIS					
	Day-in-time Dec 1 Count		Difference		
Gender	2007	2008	Number	Percent	Flag
Male	2832	3050	218	8%	
Female	1741	1856	115	7%	
Totals	4573	4906	333		

U.S. DEPARTMENT OF EDUCATION OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES OFFICE OF SPECIAL EDUCATION PROGRAMS	TABLE 2	REPORT OF PROGRAM SETTING WHERE EARLY INTERVENTION SERVICES ARE PROVIDED TO CHILDREN WITH DISABILITIES AND THEIR FAMILIES IN ACCORDANCE WITH PART C	OMB NO.: 1820-0557 FORM EXPIRES: 11/30/2009	PAGE 1 OF 2
	Child Count Date for 2008	STATE WA - WASHINGTON		
	SECTION A			
A1. AGE GROUP AND SETTING OF INFANTS AND TODDLERS, AGES BIRTH THROUGH 2				
	Total	Birth to 1 (0 TO <12 months)	1 to 2 (>=12 and <24 months)	2 to 3 (>=24 and <36 months)
TOTAL (ROWS 1-3)	4906	410	1555	2941
1. HOME	3275	323	1160	1792
2. COMMUNITY-BASED SETTING	784	29	171	584
3. OTHER SETTING	847	58	224	565
				COMPUTED TOTALS
				4906
				3275
				784
				847
A2. AGE GROUP AND SETTING OF CHILDREN, AGES 3 OR OLDER				
	Total	(>=36 and <48 Months)	4 to 5 (>=48 and <60 Months)	5 or older (>=60 months)
TOTAL (ROWS 1-3)	-9	-9	-9	-9
1. HOME	-9	-9	-9	-9
2. COMMUNITY-BASED SETTING	-9	-9	-9	-9
3. OTHER SETTING	-9	-9	-9	-9
				COMPUTED TOTALS
				0
				0
				0
				0
COMPUTED COLUMN TOTAL FOR AGES BIRTH TO 2	4906	410	1555	2941
COMPUTED COLUMN TOTAL FOR AGES 3 OR OLDER	0	0	0	0

U.S. DEPARTMENT OF EDUCATION OFFICE OF SPECIAL EDUCATION AND REHABILITATIVE SERVICES OFFICE OF SPECIAL EDUCATION PROGRAMS	TABLE 2		PAGE 2 OF 2							
	REPORT OF PROGRAM SETTING WHERE EARLY INTERVENTION SERVICES ARE PROVIDED TO CHILDREN WITH DISABILITIES AND THEIR FAMILIES IN ACCORDANCE WITH PART C				OMB NO.: 1820-0557					
					FORM EXPIRES: 11/30/2009					
	Child Count Date for 2008				STATE: WA - WASHINGTON					
	SECTION B									
B.1 RACE/ETHNICITY AND SETTING OF INFANTS AND TODDLERS, AGES BIRTH THROUGH 2										
	TOTAL	AMERICAN INDIAN OR ALASKA NATIVE	ASIAN OR PACIFIC ISLANDER	BLACK (Not Hispanic)	HISPANIC	WHITE (Not Hispanic)	COMPUTED TOTALS	TOTAL SETTING SECTION A		
TOTAL (ROWS 1-3)	4140	107	277	171	863	2722	4140	4906		
1. HOME	2771	56	212	114	648	1741	2771	3275		
2. COMMUNITY-BASED SETTING	663	37	31	31	115	449	663	784		
3. OTHER SETTING	706	14	34	26	100	532	706	847		
B.2 RACE/ETHNICITY AND SETTING OF CHILDREN, AGES 3 OR OLDER										
	TOTAL	AMERICAN INDIAN OR ALASKA NATIVE	ASIAN OR PACIFIC ISLANDER	BLACK (Not Hispanic)	HISPANIC	WHITE (Not Hispanic)	COMPUTED TOTALS	TOTAL SETTING SECTION A		
TOTAL (ROWS 1-3)	-9	-9	-9	-9	-9	-9	0	-9		
1. HOME	-9	-9	-9	-9	-9	-9	0	-9		
2. COMMUNITY-BASED SETTING	-9	-9	-9	-9	-9	-9	0	-9		
3. OTHER SETTING	-9	-9	-9	-9	-9	-9	0	-9		
COMPUTED COLUMN TOTAL FOR AGES BIRTH TO :										
	4140	107	277	171	863	2722				
COMPUTED COLUMN TOTAL FOR AGES 3 OR OLDER										
	0	0	0	0	0	0				

Year-to-Year Change Report					
Table 2 Section A		Flag: The criteria for year-to-year change is a difference of 10% and 10 children.			
Report of Program Setting					
Date: December 1, 2008		WA-Washington State			
A.1. Age Group & Setting of Infants and Toddlers, Ages Birth Through Two					
	Day-in-time Dec 1 Count		Difference		
Age	2007	2008	Number	Percent	Flag
Birth to One	458	410	-48	-10%	Yes
One to Two	1396	1555	159	11%	Yes
Two to Three	2719	2941	222	8%	
Totals	4573	4906	333		
The 10 percent decrease in the number of children Birth to One may be attributed to recent Department of Health Statical findings of the decrease in number of births from 2006-2007.					
The 11 percent increase in the number of children One to Two could be due to increased Child Find activities. This also reflects overall increases in the number of children served in the State of Washington.					
	Day-in-time Dec 1 Count		Difference		
Settings	2007	2008	Number	Percent	Flag
Home	2793	3275	482	17%	Yes
Community-based	613	784	171	28%	Yes
Other	1167	847	-320	-27%	Yes
Totals	4573	4906	333		
The 17 percent increase in the number of infants and toddlers, and their families, served in the home could be due a statewide focus to increase services in natural environments.					
The 28 percent increase in the number of infants and toddlers, and their families, served in community-based settings could be due a statewide focus to increase services in natural environments.					
ITEIP continues to decrease services in other settings, as reflected again this year in a 27% decrease. The number of infants and toddlers, and their families, served in the other settings is could be due to increased natural environments focus and activities.					

Year-to-Year Change Report					
Table 2 Section B		Flag: The criteria for year-to-year change is a difference of 10% and 10 children.			
Report of Program Setting					
Date: December 1, 2008		WA-Washington State			
B.1. Race/Ethnicity & Setting of Infants and Toddlers, Ages Birth Through Two					
	Day-in-time Dec 1 Count		Difference		
Race/Ethnicity	2007	2008	Number	Percent	Flag
American Indian or Alaska Native	119	107	-12	-10%	Yes
Asian or Pacific Islander	237	277	40	17%	Yes
Black (Not Hispanic)	145	171	26	18%	Yes
Hispanic	776	863	87	11%	Yes
White (Not Hispanic)	2621	2722	101	4%	
Totals	3898	4140	242		
families, served may be attributed to recent Department of Health Statical findings of the decrease in number of births for 2006 to 2007. The records show in 2005 to 2006 birth rate increased 130 and in 2006 to 2007 the increase was 117 and overall decrease of 1 percent.					
The 17 percent increase in the number of Asian/Pacific Islander infants and toddlers, and their families, served could be due to increased child find activities.					
The 18 percent increase in the number of Black/African American infants and toddlers, and their families, served could be due to increased Child Find activities.					
The 11 percent increase in the number of Hispanic American infants and toddlers, and their families, served could be due to increased Child Find activities.					

J. Public Comment Notification and Participation

The Part C section of the Individuals with Disabilities Education Act (IDEA) requires states to hold a public comment period for each year's submission of their application for funds. This requirement is in effect regardless of whether or not policies and procedures have been amended.

A Public Comment Notice, dated March 16, 2009, was distributed by email, to our large distribution list and was posted on our website, until May 18, 2009. The 30-day public comment period was from March 23 through April 22, 2009. The notice invites open public comment on the Washington State Infant Toddler Early Intervention Program (ITEIP) Annual State Application Under Part C of the Individuals with Disabilities Education Act for Federal Fiscal Year 2009 (FFY 09).

By the end of the comment period, ITEIP received six comments. The comments pertained to Section IV of Washington State's Federally Approved Plan. ITEIP did not modify its application in response to Section IV comments it received, regarding evaluation and eligibility procedures, Individualized Family Service Plans, and transition planning requirements. Rather, ITEIP will provide appropriate policy guidance through memos of clarification and other written means.

ITEIP's notice of public comment follows this section.



STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Olympia, Washington 98504

For Immediate Release
Date: **March 16, 2009**

PUBLIC COMMENT NOTICE

The Individuals with Disabilities Education Act (IDEA), Part C, requires the public have an opportunity to comment on each state's annual application, for early intervention funds. This requirement must be met whether or not policies and procedures have been amended. (Please Note: IDEA, Part C, policies, procedures, and definitions have not been revised because the proposed federal regulations were withdrawn in January 2009.)

This public comment notice is given to announce and invite open public comment on the attached Washington State Infant Toddler Early Intervention Program (ITEIP) Annual State Application Under Part C of IDEA, 2004, Federal Fiscal Year 2009 (FFY 09) funding. The changes made to this year's federal application are in Section II to update the submission date for changes to June 30, 2010; and Section III Description of Use of Part C Funds.

The federal application attachments include the following documents: State Interagency Coordinating Council (SICC) membership list, SICC Summary of Membership Categories list, Annual Report Certification of the SICC, and copies of the December 1, 2008 Unduplicated Count cover letter, Table I and Table II.

Washington's federal application is available on the ITEIP website at www.dshs.wa.gov/iteip, under the "What's New" tab located at the top of the far right column. If a copy of the federal application is needed in Braille, large print, type, or through other auxiliary aids, please call Kathy Shore, at (360) 725-3518, fax (360) 725-3523, TTY (360) 407-1087, or email your request to Kathy at ShoreKL@dshs.wa.gov.

The 30-day public comment period is March 23 through April 22, 2009. Written comments should be mailed to the Infant Toddler Early Intervention Program (ITEIP) at P.O. Box 45201, Olympia, Washington 98504-5201. Comments may also be faxed to (360) 725-3523, or email your comments to Darlene Woods, at WoodsDM@dshs.wa.gov. When emailing your comments, please type "Washington Annual Application, Under Part C, Comments" in the subject line.



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